



## MISSISSIPPI STATE DEPARTMENT OF HEALTH

### Mississippi Trauma Advisory Committee- Meeting Minutes

<b>MEMBERS PRESENT:</b> Amber Kyle, Walter Grace, Hugh Gamble MD; Mark Galtelli; William Avara MD; Clyde Deschamp; David Grayson; Jonathan Wilson; Dwayne Blaylock; Douglas Higginbotham; Wade Spruill; Debbie Berry; Leslie McKenzie MD; Rick Carlton MD; <b>Members Absent:</b> William Lineweaver; Janie Clanton, Ben Yarbrough MD				
<b>FACILITATOR: Dr. Avara, Chairman</b> <b>CALL TO ORDER: TIME: 10:11 AM/PM</b> <b>DATE: 8/9/2017</b> <b>PLACE: MSDH Cobb Auditorium/ Osborne Building</b>				
<b>MINUTES OF MEETING:</b> Minutes: <input type="checkbox"/> Approved; <input type="checkbox"/> Not Approved; <input type="checkbox"/> Distributed by E-mail				
TOPIC	MAIN POINTS OF DISCUSSION/CONCLUSIONS	RECOMMENDATIONS/ACTION	RESPONSIBLE PARTY	F/U Date
<b>Welcome</b>				
<ul style="list-style-type: none"> <li><b>Dr. Avara</b></li> </ul>	<ul style="list-style-type: none"> <li>Called the meeting to order</li> <li>Welcomed all present</li> </ul>	N/A		N/A
<b>Review of minutes from the previous meeting: 5-10-2017</b>		<ul style="list-style-type: none"> <li>Jonathan Wilson Motion</li> <li>2<sup>nd</sup> Mark Galtelli</li> </ul>		M-S-P
<b>(BACS Update)</b> <b>David Hall</b>	<ul style="list-style-type: none"> <li>See attached power point. Discussion of amount distributed, Wayne updated group of where cut was from. Administrative payments projected to be distributed this month.</li> <li>Requesting update to the current vendor software</li> <li>TRUG training well attended.</li> <li>RFP- in process question as to when that will be mailed out. No date set currently.</li> <li>Data validation audits to be resumed this fiscal year.</li> <li>Question program should receive 20 million? Mr. Craig updated group on funding. Request to have funding to facilities by 9-30-2017.</li> <li>Question of how much of the total budget spent in department? Wade stated region directors had a work session where they attempted to put together a blueprint to provide to Dr. Donald for an overview of the trauma system; during that session questions regarding data. Teresa updated group the data wasn't the concern; the way the data was being mined was incorrect. Concern is that individuals that have not received training/education on obtaining data from the registry and presenting the information as part of the trauma system of care. Currently the validation process is occurring at the state level and some of the facilities. Currently no validation process is occurring within the regions to our knowledge.</li> </ul>	<ul style="list-style-type: none"> <li>Audits Financial to be up to date by end of October</li> <li>Trauma Rules and Regulations approved and filed- to be posted to website.</li> <li>David updated the group of the total amount state/department is 4%; Regions are 8% and hospitals and EMS receive 88%.</li> <li>Data validation task group to review process for validation at hospital, region and state level.</li> </ul>	BACS  BACS       David       Jimmy	Next meeting  Next meeting       Closed       Next meeting
<b>OLD BUSINESS</b>				



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<ul style="list-style-type: none"> <li><b>Dr. Donald</b></li> </ul>	<ul style="list-style-type: none"> <li>CEC (reports directly to the Board of Health as requested by the task force group) meeting and discussion of the Activation Criteria. Discussion to separate the destination criteria</li> <li>Question if there are processes to monitor if hospitals are creating their own criteria for activations.</li> <li>Amber states the suspicion of hypothermia, drowning or hanging these items are not included in the activation criteria. Do we want to include these in activation criteria? Dr Avara states believe we have 2 separate concerns. Dr. McKenzie states if we add secondary to traumatic mechanism.</li> <li>Wade asked if we could make recommendation to the BOH regarding the Activation Criteria for the October Board Meeting. Jim states we also have to abide by the administrative procedure act.</li> <li>Amber asks how the state PI committee, CEC &amp; registry committee work together/ collaborate. Dr. Donald gave summary of how the committees will interact and collaborate.</li> </ul>	<ul style="list-style-type: none"> <li>Proceed with minimal activation criteria of orange book pg. 38</li> <li>Recommend EMS use 2011 CDC Field triage criteria for destination criteria.</li> <li>Patient <math>\geq 70</math> with a Same height fall- Isolated femoral neck fracture should not be included into the registry</li> <li>Process to determine the time of disposition/ or consent separately than the time of discharge.- to rules and regs for definition of disposition time.</li> <li>Motion to approve the current proposed criteria- Doug H 2<sup>nd</sup> – Amber Kyle</li> <li>Separate Activation Criteria and Destination guidelines: Jonathan Wilson- Motion 2<sup>nd</sup> Wade</li> <li>Activation criteria based on guidelines in orange book Dr. Gamble- motion. 2<sup>nd</sup> Jonathan Wilson</li> </ul>	<p><b>M-S-P</b></p> <ul style="list-style-type: none"> <li>Activation criteria will need to go to thru process- will go to BOH meeting in Jan- no oppose will be effective in February.</li> <li>Separate the Activation Criteria and Destination Guidelines. EMS will follow destination guidelines; hospitals will be responsible for activation criteria.</li> </ul>	Next meeting
<b>Region Reports</b>	<ul style="list-style-type: none"> <li>In packet for review</li> </ul>			Ongoing
<b>Committee Reports</b>	<ul style="list-style-type: none"> <li><u>Rules &amp; Regulations</u> - PI chapter in draft form; discussion of definition of delinquent (referred to registry subcommittee) and consensus (sent to registry subcommittee).</li> </ul>			
	<ul style="list-style-type: none"> <li><u>Functionality</u> – Discussion of TNCC requirements; Clyde concerned that with new AC/ DG will need communication from EMS and hospitals. Dr. Donald states when EMS calls the hospital report; hospitals will activate</li> </ul>			
	<ul style="list-style-type: none"> <li><u>Burn Subcommittee</u> – Burn committee met couple of times to discuss PI and PI indicators- need to be approved. Will require education to the facilities that data is being entered consistently.</li> <li>Working on pediatric burn center requirements and what each facility offers. Please see attached “burn questionnaire” for approval / recommendations.</li> <li>Burn destination guidelines – have been approved at MTAC. David updated need to collaborate with EMS and provide input.</li> <li>Wade asks how burn is funding and if that was cut? Mr. Craig</li> </ul>	<ul style="list-style-type: none"> <li>Burn PI indicators to PI Committee and Rules and Regs.</li> <li>Mark to report on burn questionnaire.</li> <li>David to collaborate with EMS for Burn Destination guidelines</li> </ul>	<p>Mark</p> <p>David</p>	<p>Next meeting</p> <p>Next meeting</p>



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	gave update burn funding. States the uncompensated burn care for FY17 depleted the fund.			
	<ul style="list-style-type: none"> <li>• <u>Trauma Registry Subcommittee</u> – Jimmy updated the group on what the registry group has been working on; ex. Fields entered in registry validation and required.</li> <li>• Data validation task group-</li> <li>• Jimmy announced his resignation as chair of the trauma registry subcommittee. Dr. Avara</li> </ul>	<ul style="list-style-type: none"> <li>• Jimmy resigned as trauma registry subcommittee chair</li> <li>• Data validation task group to meet</li> </ul>	Jimmy	Next meeting
	<ul style="list-style-type: none"> <li>• <u>MATA</u> – no report</li> </ul>		Norm /MATA	Ongoing
<b>State PI Committee</b> <ul style="list-style-type: none"> <li>• <b>Dr. Donald</b></li> </ul>	<ul style="list-style-type: none"> <li>• Dr. Donald gave overview of what the PI committee is reviewing- mortality. States we are looking at trends within the region to determine best practices that could be shared related to patients expired at Level III/IV; is this related to severity of injury, etc.</li> <li>• Transfer patterns in /out of regions- how to determine the time of transfer and differentiate if time waiting is in facilities</li> <li>• PI plan and indicators</li> </ul>	<ul style="list-style-type: none"> <li>• How to determine time of transfer</li> <li>• Differentiate time waiting in facility vs time waiting on EMS</li> </ul>	Dr. Donald	ongoing
<b>NEW BUSINESS</b>				
	<ul style="list-style-type: none"> <li>• Wade suggested update from Mr. Oliver regarding board of health task force. Mr. Oliver stated the task force was created last July to work with legislators regarding funding but has completed the work. Mr. Oliver states significant reduction; states went from 12 million every 6 months in 2014. States 2014 is the last report posted on the website.</li> </ul> <p>Recommendation and Summary from task group as follows:</p> <ul style="list-style-type: none"> <li>• Recommendation TMD- done</li> <li>• Bill Oliver states he is working on EMS UPL payment- with Medicaid to get a 4:1 match. States currently no response from Medicaid to move forward with process. - States will make this a legislative effort.</li> <li>• BOH to set specific funding level goals- not met – need to tell the board of what we need (2015 report). Need resolution to be sent to the board by MTAC. States report done in 2015 and that needs to be shared.</li> <li>• Annual reports- each region should present a report with data to support what is happening in the region to the department to include in board of health report. (Need by September) Mr. Oliver states no report is being shared with the board of health.</li> </ul>	<ul style="list-style-type: none"> <li>• Task force complete- Mr. Oliver</li> <li>• MSDH- State Trauma Medical Director</li> <li>• Mr. Craig- historical status of the BOH report- this was in answer to questions that the board wanted to know. May be able to add additional items to the report.</li> <li>• Regions to provide annual report of what is occurring in the region to the department.</li> </ul>	<p>Closed</p> <p>MSDH</p> <p>MSDH</p> <p>Regions</p>	<p>Closed</p> <p>Closed</p> <p>Ongoing</p> <p>Ongoing</p>



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	<ul style="list-style-type: none"> <li>Coordinate between regions and department to decrease administrative cost. – Not complete</li> <li>Risk of what will affect the trauma system; do we have adequate number of nurses and physicians, do we have access to Level I facilities.</li> <li>Bill Oliver states he has scheduled hearings with legislature in September and October. Dr. Avara asked if dates and times had been shared with group, Mr. Oliver states not thru taskforce because taskforce is complete. (Mims- McComb)</li> <li>Amber states report goes to the board every quarter; is there something that needs to be changed/ updated. Discussion of the report that is sent to BOH quarterly.</li> </ul>	<ul style="list-style-type: none"> <li>Regions and BACS to coordinate to review admin cost</li> <li>Bill Oliver to send dates of scheduled hearings to group</li> <li>Board of Health report               <ul style="list-style-type: none"> <li>Transport times</li> <li>ED LOS/Transfer times</li> </ul> </li> </ul>	BACS/ Regions   Bill Oliver   BACS- BOH Report	Next meeting   Next Meeting   Ongoing
<b>DISCUSSION</b>	<ul style="list-style-type: none"> <li>Review funding – how received and spent</li> <li>BOH report prior to meeting to MTAC members.</li> <li>How much is hospital and trauma centers paid for care/ per patient- how does this relate to what is paid by insurance companies</li> <li>Look at Arkansas study on the finances of the state and how it affects the individuals and back into society.</li> <li>How to advise the public of the successes. Ex. Tourniquet program. Marketing the system and lives saved.</li> </ul>	<ul style="list-style-type: none"> <li>Motion by Wade- send resolution to the Board to get funding back to \$40 million authority to spend.</li> <li>2<sup>nd</sup> by Jonathan Wilson</li> <li>Dr. Gamble states the department is not able to lobby the legislator but the MTAC group is able to do so.</li> <li>Wade amended motion to state increase the authority to spend from the appropriations to \$28 million.</li> <li>Jonathan motions to have Mr. Oliver send information requested to department &amp; talking points to be disseminated to the committees that each of them represent.</li> <li>Update the agenda to accomplish items that are important.</li> </ul>	<b>M-S-P</b> Wade Spruill-motion 2 <sup>nd</sup> - Dr. Gamble <b>MTAC</b> to send resolution to the Board to get funding back to \$28 million authority to spend.  <b>M-S-P</b> Jonathan Wilson-motion 2 <sup>nd</sup> Wade Spruill <b>Mr. Oliver</b> to send requested information to department with talking points to be disseminated to the committees.	Prior to next Meeting       Prior to next meeting
	<ul style="list-style-type: none"> <li>Update of MTAC members (see attached list)</li> </ul>	<ul style="list-style-type: none"> <li></li> </ul>		
<b>ADJOURNMENT:</b> 12: 26 AM/PM <b>Next Meeting:</b> August 9, 2017 <b>MINUTES RECORDED BY:</b> Teresa Windham				